Substitute for form 1449/PTO				Complete if Known		
				Application Number	10/694,502	
				Filing Date	October 24, 2003	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				First Named Inventor	Bowler, Steven B.	
			CANI	Art Unit	3624	
(Use as many sheets as necessary)				Examiner Name	Mark A. Fleischer	
Sheet	1	of	1	Attorney Docket Number	021756-048300US	

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant	
Initials: No.	INO.	Number Kind Code ^{2 (Fixnown)}	MM*DD*TTTT	Applicant of cited bocament	Figures Appear	
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		Country Code ³ Number ⁴	Kind Code ⁵ (if known)	MM-DD-YYYY		or Relevant Figures Appear	Τ'		

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T
	482_A	Non-Final Office Action for US Application 10/422,297 mailed on March 26, 2008; 13 pages. (Copy available to the Examiner via PAIR and accordingly not included with this IDS).	
	482_B	Final Office Action for US Application 10/422,297 mailed on October 24, 2008;11 pages. (Copy available to the Examiner via PAIR and accordingly not included with this IDS).	
	482_C	Non-Final Office Action for US Application 10/422,297 mailed on September 19; 2007; 15 pages. (Copy available to the Examiner via PAIR and accordingly not included with this IDS).	Г
	482_D	Advisory Action or US Application 10/422,297 mailed on January 29, 2009; 3 pages. (Copy available to the Examiner via PAIR and accordingly not included with this IDS).	Е

Examiner Signature /Mark Fleischer/	Date Considered	02/02/2010	
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EXAMINET: initial if inference considered, whether or not clation is in conformance with MFEP 600. Draw line through citation if not in conformance and not considered, include copy of this form with next communication to applicant.

^applicant's unique citation designation number (optional).

Applicant's to place a check mark here if English language Translation is attached.

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